POLICY: CRT: 07.02.02 Page 1 of 2

Subject: Determine Nutrition Risk - Blood Lead Test

Effective Date: October 1, 2004 Revised from:

Policy: Local Agencies shall ask if the applicant has received a blood lead test within the past 12 months.

Reference: PL 106-387

Procedure:

1. Ask if the applicant has received a blood lead test within the past 12 months.

- 2. If an infant or a child has not had a blood lead test, refer to the appropriate local resource.
 - a. If the WIC clinic is located at the infant/child's medical home, it is strongly recommended that the appropriate staff complete the blood lead test while the infant/child is in the clinic.
 - b. Document the referral on the referral tab in KWIC.
- 3. If yes, ask the applicant / caregiver when the test was completed and by whom.
 - a. Document verbal confirmation of the test in KWIC.
 - b. Assess level.
 - If the caregiver does not know what the blood lead level was, refer to the appropriate local resource to be assessed.
 - If the blood lead level was ≥ 5 μg/deciliter:
 - Refer to the appropriate local resource using the Blood Lead Referral Criteria chart. Document the referral on the referral tab in KWIC;
 - Emphasize the importance of diet in the treatment of lead.
 - Increased lead absorption has been associated with a calcium-deficient diet and with low iron stores. Emphasize the WIC supplemental foods that are high in iron and calcium.
 - Encourage breakfast, regular meals, and nutritious snacks since more lead is absorbed on an empty stomach.
 - Since lead is absorbed to a greater extent from water and beverages, instruct to offer drinks along with food.
 - Provide information on how to reduce exposure to lead.
 - A good resource for this information is the "Helpful Hints to Reduce Lead" from the Kansas Childhood Blood Lead Testing and Case Management Guidelines.
 - This sheet is available on-line in English and Spanish at http://www.unleadedks.com/medical_surveillance.htm#hh.
 - If the blood lead level was > 10 µg/deciliter the CPA should assign the risk factor Elevated Blood Lead Level.

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Blood Lead Referral Criteria

- 1. Blood lead level < 5 μg/dl No additional action necessary unless exposure sources change.
- 2. Blood lead level 5-14 μ g/dl Refer for retesting within three months from date of original blood lead test.
- 3. Blood lead level 15-19 µg/dl
 - a. Refer for venous blood lead confirmation test within 1 month from date of original blood lead test.
 - b. Two or more venous blood lead levels in this range warrant referral for medical and environmental evaluation.
- 4. Blood lead level 20-24 µg/dl.
 - a. Refer for venous blood lead confirmation test within 2 weeks from date of original blood lead test.
 - b. Refer for medical and environmental evaluation within one month from date of original blood lead test.
- 5. Blood lead level 25-44 µg/dl.
 - a. Refer for venous blood lead confirmation test within 1 week from date of original blood lead test.
 - b. Refer for immediate medical and environmental evaluation.
- 6. Blood lead levels 45-69 µg/dl.
 - a. Refer for immediate venous blood lead confirmation test.
 - b. Refer for immediate medical and environmental evaluation.
- 7. Blood lead levels ≥ 70 µg/dl.
 - a. Levels in this range constitute a medical emergency and should receive immediate medical evaluation and care including hospitalization.
 - b. Lead hazard control is essential before the child is returned to the environment.